PTO/SB/06 (07-06)

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Application or Docket Number Filing Date 10/829,340 04/22/2004				To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)								OTHER THAN SMALL ENTITY OR SMALL ENTITY					
	FOR	N	NUMBER FILED		NUMBER EXTRA			RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)	
	BASIC FEE (37 CFR 1.16(a), (b),	or (c))	N/A		N/A			N/A		1	N/A		
	SEARCH FEE (37 CFR 1.16(k), (i),	or (m))	N/A		N/A			N/A]	N/A		
	EXAMINATION FE (37 CFR 1.16(a), (p),		N/A		N/A			N/A			N/A		
	TAL CLAIMS CFR 1.16(i))		minus 20 =					x \$ =		OR	x s =		
	EPENDENT CLAIN CFR 1.16(h))	is	minus 3 =					x \$ =		1	x \$ =		
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addit	If the specification and dra sheets of paper, the applic is \$250 (\$125 for small en additional 50 sheets or fra 35 U.S.C. 41(a)(1)(G) and			ion size fee due r) for each on thereof. See							
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.18(j))										ı			
* If	the difference in col	umn 1 is less than	zero, ente	TOTAL		J	TOTAL						
APPLICATION AS AMENDED - PART II OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY													
AMENDMENT	11/15/2007	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSI PAID FOR	LY	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(i))	· 8	Minus	~ 20		= 0		x \$ =		OR	X \$50=	0	
	Independent (37 CFR 1.16(h))	• 2	Minus	···3		= 0		x \$ =		OR	X \$210=	0	
	Application Size Fee (37 CFR 1.16(s))									ᆫ			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR			
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0	
(Column 1) (Column 2) (Column 3)													
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUS PAID FOR	} LY	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1,16(i))		Minus	**		=		x \$ =		OR	x s =		
	Independent (37 CFR 1.16(h))	*	Minus	***				x \$ =		OR	x \$ =		
	Application Size Fee (37 CFR 1.16(s))									ı			
ΑV	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR			
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
**	If the entry in column 1 is less than the entry in column 2, write 0" in column 3. Legal Instrument Examiner: If the "Highest Number Perviously Paid For IN THIS SPACE is less than 30, enter "20". If the "Highest Number Perviously Paid For IN THIS SPACE is less than 3, enter "2". If the "Highest Number Perviously Paid For IN THIS SPACE is less than 3, enter "3". If the Philipse Number Perviously Paid For IN THIS SPACE is less than 3, enter "3". If the "All Paid Number Perviously Paid For IN THIS SPACE is less than 3, enter "3". If the "All Paid Number Perviously Paid For IN THIS SPACE is less than 3, enter "3". If the "All Paid Number Perviously Paid For IN THIS SPACE is less than 3, enter "3". If the "All Paid Number Perviously Paid For IN THIS SPACE is less than 3, enter "3". If the "All Paid Number Perviously Paid For IN THIS SPACE is less than 3, enter "3". If the "All Paid Number Perviously Paid For IN THIS SPACE is less than 3, enter "3". If the "All Paid Number Perviously Paid For IN THIS SPACE is less than 3, enter "3". If the "All Paid Number Perviously Paid For IN THIS SPACE is less than 3, enter "3". If the "All Paid Number Perviously Paid For IN THIS SPACE is less than 3, enter "3". If the "All Paid Number Perviously Paid For IN THIS SPACE is less than 3, enter "3". If the "All Paid Number Perviously Paid For IN THIS SPACE is less than 3, enter "3". If the "All Paid Number Perviously Paid For IN THIS SPACE is less than 3, enter "3". If the "All Paid Number Perviously Paid For IN THIS SPACE is less than 3, enter "3". If the "All Paid Number Perviously Paid For IN THIS SPACE is less than 3, enter "3". If the "All Paid Number Perviously Paid For IN THIS SPACE is less than 3, enter "3". If the "All Paid Number Perviously Paid For IN THIS SPACE is less than 3, enter "3". If the "All Paid Number Perviously Paid For IN THIS SPACE is less than 3, enter "3". If the "All Paid Number Paid For IN THIS SPACE is less than 3, enter "3". If the "All Paid Number Paid Number Paid For IN THIS SPA												

This collection of information is required by 37 CFR 1.16. The information is required to obtain or relain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, process) an application. Confidentiality is given that by 30.30.4. LZ and 37.47K 1.14. The confidential is constituted to consider a limited to complete the completed application form to the USPTO. Time will vay depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.